## ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

## University Of Arkansas

120 Ozark Hall
Fayetteville, AR 72701
Telephone: (479) -575-3845

## REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessarv or use APHIS Form 7023A)

| A. <br> Animals Covered By The Animal Weffare Regulations | B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not $y \in$ used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use $\sigma$ pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animats upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasc such drugs were not used must be attached to this repor | F. <br> TOTAL NUMBER OF ANIMALS <br> (COLUMNS $C+D+E)$ |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 4. Dogs |  |  |  |  |  |
|  |  |  |  |  | NA |
| 5. Cats |  |  |  |  |  |
|  |  |  |  |  | NA |
| 6. Guinea Pigs |  |  | . |  |  |
| 7. Hamsters | 36 |  | 61 |  | 61 |
| 8. Rabbits |  |  |  |  | 0 |
| 9. Non-human Primates |  | . |  |  | NA |
| 10. Sheep | , |  |  |  | 0 |
| 11. Pigs |  |  |  |  | 0 |
| 12. Other Farm Animals |  |  |  |  | 0 |
|  |  |  |  |  |  |
| 13. Other Animais | . |  |  | . | 0 |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| ASSURANCE STATEMEN |  |  |  |  |  |

 teaching, testing, surgery, or experimentation were followed by this research facility.
2) Each principal investigator has considered alternatives to painful procedures.

 brief explanation of the exceptions, as well as the species and number of animals affected.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL
( Chief Executive Officer or Legally Responsible Institutional Official)

SIC

| rPrint) | DATE SIGNED |
| :--- | :--- |

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(neplaces vo rurim io-Ls (ULi 80 ), winen is oosoiele.)
(AUG 91 )

Attachment
Facility Locations for Registration \#71-R-0001

Central Laboratory Animal Facility<br>Animal Sciences Building.<br>Basement of "A" wing<br>University of Arkansas<br>Fayetteville, AR 72701

Research Support and Sponsored Programs
Office of the Director
120 Ozark Hall
Fayetteville, Arkansas 72701

November 23, 2004

Dr. Robert M. Gibbens, DVM
Regional Director - Animal Care
USDA, APHIS -Western Regional Office
2150 Centre Avenue
Building B, Mail Stop \#3W11
Ft. Collins, CO 80526

RE: Annual Report of Research Facility Registration No. 71-R-0001

Dear Dr. Gibbens:

Enclosed is the Annual Report of Research Facility for the period October 1, 2003 through September 30, 2004 submitted on behalf of the University of Arkansas.

The not applicable (NA) designation in the spaces for dogs, cats, and non-human primates reflects the University's policy for not permitting the use of these species on the $U$ of $A$, Fayetteville campus.

Sinnoralver

Enclosure

## ANNUAL REPORT OF RESEARCH FACILITY ( TYPE OR PRINT)

F.D.A./N.C.T.R.

Office Of Research Services
3900 N.C.T.R. Dr.
Jefferson, AR 72079
Telephone: (870) -543-7949


FACILITY LOCATIONS ( Sites ) - See Atached Listing

 teaching, testing, surgery, or experimentation were followed by this research facility.
2) Each principal investigator has considered altematives to painful procedures.

 brief explanation of the exceptions, as well as the species and number of animals affected.


> CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL
(Chief Executive Officer or Legally Responsible Institutional Official )

FOFCFO OR INSTITIITINNAI QFFICIAI
I NAME \& TITI F OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)
|DATE SIGNED $11-1 P-04$

See reverse side for additional information.

Interagency Report Control No 0180-DOA-AN

# ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT) 

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets if necessary.)

UNIV OF A R FOR MEDICAL SCI
FACILITY LOCATIONS(sites)
LITTLE ROCK, AR 72205

UNIV OF A R FOR MEDICAL SCI
4301 W MARKHAM SLOT 504 LITTLE ROCK, AR 72205


1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
2) Each principal investigator has considered alternatives to painful procedures.
3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation A summary of all the exceptions is attached to this annual report. In
T) The atten exproved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
aspects of animal care and use.

\section*{|  | $\begin{array}{c}\text { CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL } \\ \text { (Chief Executive Officer or Legally Responsible Institutional official) } \\ \text { I certify that the above is true, correct, and complete (7 U.S.C. Section 2143) }\end{array}$ |
| :--- | :--- |
| SIGNATURE |  |}

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL |NAME \& TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

## ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

Univ Of Ark-Little Rock

2801 S University
Little Rock, AR 72204
Telephone: (501) -56؟ ${ }^{\sim \sim}$.


## FACILITY LOCATIONS ( Sites ) - See Atached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessarv or use APHIS Form 7023A )


1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and franquilizing drugs, prior to, during, and following actual rese: teaching, testing, surgery, or experimentation were followed by this research facility.
2) Each principal investigator has considered alternatives to painful procedures.
3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and apt Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. in addition to identifying the IACUC-approved exceptions, this summary in. brief explanation of the exceptions, as well as the species and number of animals affected.
4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL
( Chief Executive Officer or Legally Responsibie Institutional Official)
( NAME \& TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)


# CONTINUATION SHEET FOR ANNUAL REPORT OF RESEARCH FACILITY <br> (TYPE OR PRINT) 

2. HEADOUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA
inciude Zip Code)
UNiv. of ARk-Little Rock 2801 S. Univensity Little Rock, AR 22204

 and following actual research, teaching, testing, surgery, or experimentation were lollowed by this research lacility.
2). Each principal investigaior has considered alternatives to painful procedures.
 principal investigator and approved by the lnstitutional Animal Care and Use Commitiee (IACUC). A summary of all such exceptions is attached to this annual report. in addition to identifying the IACUC-approved exceptions, this summary includes a briel explanation of the exceptions, as well as the species and number of animals affected.



## ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

# Ar Children'S Hosp Res Inst <br> 1120 S Marshall St <br> Little Rock, AR 72202 

Telephone: (501) -364-2700

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets If necessarv or use APHIS Form 7023A )

 teaching, testing, surgery, or experimentation were followed by this research facility.
2) Each principal investigator has considered alternatives to painful procedures.

 brief explanation of the exceptions, as well as the species and number of animals affected.


# ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT) 

## A R Children'S Hosp Res Inst

1120 S Marshall St
Little Rock, AR 72202
Telephone: (501) -

REPORTING FACILTY ( List all locations where animals were housed or used in actual research, lesting, or experimentation, or held for these purposes. Attach additional sheets if necessary )

| . FACILITY LOCATIONS ( Sites ) - See Atached Listing |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 2EPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILTY ( Attach additional sheets if necessarv or use APHIS Form 7023A ) |  |  |  |  |  |
| Animals Covered By The Animal Welfare Regulations | B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments. research, or surgery but not $y \in$ used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use $\sigma$ pain-relieving drugs. | D. Number of animals upan which experiments, teaching, research, surgery, or tests were conducted involving accomparying pain or distress to the animals an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving ascompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures prodicing pain or distress in these animats and the reasc such drugs were not used must be attached to this report | F. <br> TOTAL NUMBER OF ANIMALS <br> ( COLUMNS $C+D+E)$ |
| Dogs |  |  | - |  |  |
| Cats |  |  |  |  |  |
| Guinea Pigs |  |  | - |  |  |
| Hamsters |  |  |  | - | - |
| Rabbits |  | . | 17 | - | 17 |
| Non-human Primates | . . | - | - |  |  |
| Sheep | . |  | - |  | - |
| Pigs | $\bullet$ | 16 | 61 | . | 77 |
| Other Farm Animals | - |  |  | . | . . |
|  |  |  | . | - |  |
| Dther Animals |  |  | - |  |  |
| Ferret |  |  | 2 |  | 2 |
| - |  | . |  | $\cdots$ |  |
|  | . | - |  |  |  |
| SURANCE STATEMENTS |  |  |  | . |  |
| 1) Professionally acceptable standards goveming the care, treatment, and use of animals, including appropriate use of anestefic, anialgesic, and tramquitizing diugs, prior to, during, and following actual rese; teaching, testing, surgery, or experimentation were followed by this research faciity. |  |  |  |  |  |
| 2) Each principal investigator has considered alternatives to painful procedures. |  |  |  |  |  |
| 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and apt institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this anmual report. in addition to identifying the IACUC-approved exceptions, this summary in brief explanation of the exceptions, as well as the species and number of animats affected: |  |  |  |  |  |
|  |  |  |  |  |  |



RESEARCH institute

January 11, 2005

United States Department of Agriculture
Animal and Plant Health Inspection Service
Animal Care Western Region
2150 Centre Ave.
Building B Mail Stop \# 3W11
Ft. Collins, CO 80526

Dear USDA,
On behalf of Arkansas Children's Hospital Research Institute, certificate number- 71-R0100 , customer number 1408, I would like to recognize a mistake that was turned in on the Annual Report of Research Facility submitted by our institution and mailed in on November 29, 2004. This annual report reflected inaccurate data in reference to \# of swine that was used for research in the period of October 1, 2003 through September 30, 2004. I have attached a revised annual report with the accurate information. This mistake was discovered during our recent AAALAC Year End Report and I immediately called @ 1-970-494-7467 and she asked me to send this cover letter with a revised Annual Report. I apologize for this error and appreciate your understanding,

Respectfully,

| UNITED STATES DEPARTMENT OF AGRICULTURE | FORM APPROVED OMB NO. 0579-0036 |
| :---: | :---: |
|  |  |
|  |  |

## ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

Pel-Freez Biologicals
205 N Arkansas
Po Box 68
Rogers, AR 72757
Telephone: (800) -643-3426
3. REPORTING FACILITY (List all locations where animais were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessarv or use APHIS Form 7023A)

 teaching, testing, surgery, or experimentation were followed by this research, facility
2) Each principal investigator has considered alternatives to painful procedures.



CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL
( Chief Executive Officer or Leaallv Resoonsible Institutional Offirial)

## ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

University Of The Ozarks
415 College Ave
Clarksville, AR 72830
Telephone: (479) -979-1361
3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessarv or use APHIS Form 7023A )

 teaching, testing, surgery, or experimentation were followed by this research facility.
2) Each principal investigator has considered alternatives to painful procedures.

 brief explanation of the exceptions, as well as the species and number of animals affected.



## ANNUAL REPORT OF RESEARCH FACILITY <br> (TYPE OR PRINT)

## Panthera Research <br> 2501 Riverfront Dr, C-108 <br> Little Rock, AR 72202

Telephone: (501)-658-9964

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessarv or use APHIS Form 7023A )

 teaching, testing, surgery, or experimentation were followed by this research facility.
2) Each principal investigator has considered alternatives to painful procedures.

 brief explanation of the exceptions, as well as the species and number of animals affected.


Panthera Research 2501 Riverfront Dr., C-108

TEL 501-658-9964
Little Rock, AR 72202

United States Department of Agriculture<br>USDA-APHIS-AC<br>Western Regional Office<br>2150 Centre Ave.<br>Building B, Mail Stop 3W11<br>Ft. Collins, CO 80526-8117<br>November 30, 2004<br>RE: Addendum to Annual Report 7020, Block 3

Secondary Site listing:
Turpentine Creek Wildlife Refuge
239 Turpentine Creek Lane
Eureka Springs, AR 72632
(USDA \#71-C-0103)

71-R-0106

## ANNUAL REPORT OF RESEARCH FACILITY

 (TYPE OR PRINT)

STATEMENTS
 teaching, testing, surgery, or experimentation were followed by this research facility.
2) Each principal investigator has considered alternatives to painful procedures.

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| A. <br> Animals Covered By The Animal Welfare Regulations | B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye used for such purposes. | C. Number of animals upon which teaching, research. experiments, or tests were conducted involving no pain, distress, or use o' pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animais upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasc such drugs were not used must be attached to this repor | F. <br> TOTAL NUMBER OF ANIMALS <br> ( COLUMNS $C+D+E)$ |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 4. Dogs | $72$ | 47 | 0 | 0 | 47 |
| 5. Oats | $53$ | 0 |  |  | $\square$ |
| 6. Guinea Pigs | 0 | $\int$ |  |  |  |
| 7. Hamsters |  |  |  |  |  |
| 8. Rabbits |  |  |  |  |  |
| 9. Non-human Primates |  |  |  |  | ) |
| 10. Sheep |  |  | ( | 1 | $\square$ |
| 11. Pigs |  |  | 1 | \% | 1 |
| 12. Other Farm Animals |  |  |  |  | ) |
|  |  |  |  | 7 | 7 |
| 13. Other Animals |  |  |  |  | ) |
|  |  |  |  |  |  |
|  |  |  |  | 5 |  |
|  |  |  |  |  | 1 |
| ASSURANCE STATEMEN |  |  |  |  |  |

 teaching, testing, surgery, or experimentation were followed by this research facility.
2) Each principal investigator has considered alternatives to painful procedures.

 brief explanation of the exceptions, as well as the species and number of animals affected.



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 animal care and use.

CERTIFICATION BY HEADQUARTES RESEARCH FACILITY OFFICIAL
(Chief Executive Officer or Legally Responsible Institutional Official)
I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).


## Summary of AWA Exceptions

During the previous year BERTEK, Inc. had two exceptions to AWA standards that were submitted by the Laboratory Director and fully approved by the BerTek, Inc. IACUC.

1. The IACUC committee empowered a single member of the committee

I to approve protocols involving insecticide testing. These tests would involve only treatment with ectoparasiticides and subsequent evaluation of ectoparasite populations and involve no painful procedures, anesthesia, surgery, or unusual stress. This reauest was made due to the small size and small number of emplovees at BerTek, Inc.

This request will be resubmitted to the IACUC for approval semi-annually.
2. One study protocol submitted and approved by the full BERTEK, Inc. IACUC involved infestation of ticks on cats. This task required the animal to be sedated and during infestation and sedation recovery be temporarily confined within transport cages without food or water. All transport cages met USDA/APHIS requirements and confinement did not exceed 24 hours.

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23 \text {, Nov O4 }
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